This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

STATEMENT OF ACCOUNT	FOR COPYRIGH	HT OFFICE USE ONLY	by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u> For additional information,
General instructions are located in the first tab of this workbook	8/28/2019	ALLOCATION NUMBER	contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2019/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	63527
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Sac County Mutual Telephone Company BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		108 S Maple St, PO Box 488 (Number, street, rural route, apartment, or suite number)	
		Odebolt, IA 51458 (City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system us already appear in space B. In line 2, give the mailing address of the system, if different from the address given in s	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2		
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	
-			

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

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	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b SYSTEM ID#
Name	Sac County Mutual Telephone Company	63527
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ty" is the same as a "community unit" as defined in FCC rules: mmunities within unincorporated areas and including single, at will serve as a form of system identification hereafter known
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Odebolt	lowa
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							STEM ID
Name	Sac County Mutual Tele		pany						6352
E Secondary Transmission Service: Sub- scribers and	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary	pace E should on of television ay cable) in sp I (June 30 or D n blocks in span y transmission	cover al and rad ace F, n ecembe ce E call service.	Il categories of io broadcasts iot here. All the r 31, as the ca l for the number In general, yo	f secondar by your sy e facts you ase may be er of subsc bu can com	stem to subscril state must be t e). rribers to the cal pute the numbe	bers. Give hose existi ble system er of subscr	information ing on the , broken ibers in	
Rates	each category by counting the miseparately for the particular serv Rate: Give the standard rate counit in which it is generally billed category, but do not include disco Block 1: In the left-hand block systems most commonly provide that applies to your system. Note	ice at the rate harged for eac . (Example: "\$2 ounts allowed in space E, the to their subsc	indicated h catego 20/mth") for adva e form lis ribers. G	d—not the nur ory of service. . Summarize a nce payment. sts the catego Give the numbe	nber of set Include bo any standar ries of sec er of subsc	s receiving serv th the amount o rd rate variation ondary transmis ribers and rate	ice). f the charg s within a p sion servic for each lis	e and the particular rate that cable ted category	
	categories, that person or entity subscriber who pays extra for ca first set" and would be counted or <b>Block 2:</b> If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	should be cour ble service to once again und has rate catego iers of services and rates, in the	nted as a additiona er "Serv ories for s that inc	a subscriber in al sets would b ice to addition secondary tra slude one or m	each appl be included al set(s)." nsmission ore second	licable category I in the count un service that are dary transmission	Example: der "Servio different fr ons), list the on of the s	a residential ce to the rom those em, together ervice is	
	BLO	OCK 1 NO. OF	:				BLOCK	K 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATI
	Residential: • Service to first set		340	75.75	service	e to first set		660	80.7
	Service to additional set(s)     FM radio (if separate rate)								
	Motel, hotel		- -	4 007 20	Comm	oroiol			###
	Commercial Converter		2	1,007.38	Comme	erciai		4	###
	Residential								
	Non-residential								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) description	e (not subscrib hose services to the two exception or facilities furr hit in which it is rate column. the charged by the sour cable system separate charg	ber) infor that are ns: you hished to usually he cable stem furn je was m	mation with re- not offered in do not need to phonsubscribe billed. If any ra e system for ea nished or offer nade or establ	espect to all combination o give rate ers. Rate in ates are ch ach of the a red during	on with any secc information con- nformation shoul arged on a varia applicable servio the accounting p	ndary tran cerning (1) d include t able per-pr ces listed. ceriod that	smission services ooth the ogram basis, were not	
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:     Pay cable	12.95		tion: Non-res	sidential				
	Pay cable—add'l channel	16.95		nmercial		30.00			
	• Fire protection			cable					
	•Burglar protection		• Pay	v cable-add'l c	hannel				
	Installation: Residential			protection					
	First set	30.00		glar protectior	1				
	<ul> <li>Additional set(s)</li> </ul>			services:					
	• EM radio (if concrete sets)			onnort					
	FM radio (if separate rate)     Converter			connect		30.00			
	<ul> <li>FM radio (if separate rate)</li> <li>Converter</li> </ul>		• Disc	connect connect let relocation		30.00			

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTE
lame	Sac County Mutual T	elephone Company		
	PRIMARY TRANSMITTERS:			
G smitters: evision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a <b>Substitute Basis Stations</b> basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic <b>Column 1:</b> List each statio multicast stream associate "WETA-2" as the same on <b>Column 2:</b> Give the chann of license. For example, W <b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast) For the meaning of these to <b>Column 4:</b> Give the location	also in space I, if the station was carrie on concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the	t (1) stations carried only on a part-t he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain sta arried by your cable system on a sub he Special Statement and Program I d both on a substitute basis and also , see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indepo- or "E-M" (for noncommercial educati- uctions in the paper SA1-2 form. t the community to which the station	ime basis under ams [sections tions carried on a postitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	κτιν	7	N	SIOUX CITY
	КРТН	4	N	SIOUX CITY
s as Necessary	KCAU	12	N	SIOUX CITY
, ,	KMEG	10	N	SIOUX CITY
	IPTV	11	N	
				ISIOUX CITY

Accounting F	Period: 2019	/1					FORM	/I SA1-2E. PAGE 4
								SYSTEM ID
Sac County	Mutual Tel	ephone	e Company					6352
all-band basis v	t every radio s vhose signals	station ca were ge	arried on a separate and discr nerally receivable by your cat	ble system during	the accountin	ig period	1.	н
ecceivable if (1) on the basis of For detailed info paper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If signal, indicate	it is carried b monitoring, to prmation about rm. dentify the cal state whether if the radio state this by placing	y the sys be recein at the Co l sign of a the static ion's sig g a check	I-Band FM Carriage: Under ( item whenever it is received a wed at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante this point, see pa sed by the cable s	adend, and (2 enna, during c ge (v) of the g system as a se	2) it can ertain st leneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
Mexican or Can	nadian station	s, if any,	the community with which the	station is identifi	ed).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		+						

Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Sac County Mutual Tel	lephone (	Company					63527
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
	In General: In space I, identi	fy every noi	nnetwork televis	sion program, broadcast by	a distant stat	ion, that your	cable syste	m carried on a
	substitute basis during the a	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regul	ations, or aut	thorizations.	For a further
Substitute	explanation of the programm				e general instr	uctions in the	e paper SA1	-2 form.
Carriage: Special	1. SPECIAL STATEMEN							
Statement and	During the accounting per	•	r cable system	carry, on a substitute basi	s, any nonnet	twork televis		
Program Log	broadcast by a distant star	tion?					YES	X NO
	Note: If your answer is "No'	', leave the	rest of this pag	e blank. If your answer is '	'Yes," you mu	ist complete	the program	n
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst clear. If you need more spa				wherever pos	sible, if their	meaning is	
				ision program ("substitute	program") tha	t, during the	accounting	
	period, was broadcast by a	distant stat	ion and that yo	ur cable system substitute	d for the prog	ramming of	another stat	tion
	under certain FCC rules, re Do not use general categor							1.
	"NBA Basketball: 76ers vs.		vies of baske	toall. List specific program		ample, 1 Lov	Ve Lucy OI	
	Column 2: If the program	n was broad		r "Yes." Otherwise enter "N				
				sting the substitute progra		need by the	FCC or in	
	the case of Mexican or Can			e community to which the community with which the			FCC or, in	
	Column 5: Give the mon	th and day	when your sys	tem carried the substitute	program. Use	numerals, v	vith the mor	nth
	first. Example: for May 7 giv							
	to the nearest five minutes.			gram was carried by your o				ly
	stated as "6:00–6:30 p.m."	Example: c	i program oann		10 p.m. to 0.2	0.00 p.m. or		
				was substituted for progra				
	to delete under FCC rules a was substituted for program							am
	effect on October 19, 1976.		our system wa			na regulatio		
	s	UBSTITUT	E PROGRAM	I		N SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T - FROM	IMES — TO	DELETION
		100 01 110	ONEE OIGH			TROM	10	
						-	_	

Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SI	STEM ID#
Name	Sac County Mutual Telephone Company		63527
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Ential amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	ssion service mount, see	,003.52 ss receipts)
	COPYRIGHT ROYALTY FEE		
L Copyright Royalty Fee	<ul> <li>Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600</li> <li>See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	63,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	his six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,10	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID # 20190829		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m		

Accounting Period:	2019/1		FORM SA1-2E. PAGE 7
Name		OF OWNER OF CABLE SYSTEM: Mutual Telephone Company	SYSTEM ID# 63527
M Channels	to its subscrib 1. Enter the to system carri	You must give (1) the number of channels on which the cable system carried television broadcast stations bers, and (2) the cable system's total number of activated channels during the accounting period.	5
	on which the	otal number of activated channels         e cable system carried television broadcast stations         adcast services	91
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ct about this statement of account.)	
for Further Information	Name	Melissa Pierce Telephone 712	2-668-2202
	Address	108 S Maple St, PO Box 488         (Number, street, rural route, apartment, or suite number)         Odebolt, IA 51458         (City, town, state, zip)	
	Email	scmtco@netins.net Fax (optional) 712-668-2100	
O Certification	I, the undersi     (Ow     (Ag     X     (Of     I have examinare true, comp	DN (This statement of account must be certified and signed in accordance with Copyright Office regulations)         gned, hereby certify that (Check one, but only one, of the boxes.)         where other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or         in line 1 of space B and that the owner is not a corporation or partnership) or partnership) of the legal entity identified as owner of in line 1 of space B.         refere or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of in line 1 of space B.         ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein blete, and correct to the best of my knowledge, information, and belief, and are made in good faith.         retion 1001(1986)]         X       /s/Ronald Sorensen         Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       Ronald Sorense	
		Title: Manager (Title of official position held in corporation or partnership)	
		Date: 08/28/2019	

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c County Mutual Telephone Company         SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS         The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."         For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.         During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below.       \$         No	Automation       Address       Image: Company       Cite         Cite       <	County Mutual Telephone Company SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Selalilie Home Viewer Act of 1988 anneaded Tile 17, section 111(x(1)(4), 0 if the Copyright Act by adding the following sentence of providing sectory transmissions of primary transmissions pursuant to section 118." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions localed time pager SA1-2 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions may are be able to set the sate by satellite carrier (s) below. Some the sate and an out is able the satellite carrier(s) below. Some the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions may are be able to a satellite dish owners? No YES. Enter the total here and list the satellite carrier(s) below. Some the accounting period is addite the satellite carrier(s) below. Some the accounting the satellite dish owners? Y Our succomplete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rate* and enter the sum here. X Our succeipts Exclusions board and the satellite carrier (s) block 3 line 6 Source (interest charge) No Yu Dia 1 by the interest rate* and enter the sum here. X Our succeipts for source or adjust in the satellite carrier (s) block 3 line 6 Source (interest charge) No Yu Dia 2 by the number of days late and enter the sum here. X Ourse (interest charge) Yu With y line 3 by 0.00274*** and enter here may for block 3 line 6 S (interest charge) No (interest charge) No (interest charge) Yu with the denial equivalent of 1/365, which is the interest assessment for one day late. No (interest charge) No (interest charge)<	unting Period: 2019/1					
SPECIAL STATEMENT CONCERNING GROSS RECIPTS EXCLUSIONS The Statilite Home Viewer Act of 1986 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: In determining the total number of subscribers and the gross amounts paid to the cable system for the basic scribers and amounts collected from subscribers and the gross amounts growthe system for the basic scribers and amounts collected from subscribers receiving secondary transmissions prustation to section 119. For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? No YES. Enter the total here and list the satellite carrier(s) below. Secial state discover and subscribers period with a sate system section of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment. Line 2 Multiply line 1 by the interest rate* and enter the sum here. x 0.00274 Line 3 by 0.00274** and enter here In space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6. So roise the linerest rate chart click on www.copyright.gov/licensing/inferest-rate.pdf. For further assistance please contains the click on www.copyright.gov/licensing/inferest-rate.pdf. For further assistance please contains the licensing Division at (202) 707-8150 or licensing@copyright.gov. * The is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served. ID number, and acco	CIAL STATEMENT CONCERNING Sentence:	Percent state and the paper of the state of the stat	L NAME OF OWNER OF CA	ABLE SYSTEM:				SYSTEM
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Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.